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Bib Data Sheet

CONFIRMATION NO. 5996

<b>SERIAL NUMBER</b> 10/812,990	<b>FILING OR 371(c) DATE</b> 03/31/2004 <b>RULE</b>	<b>CLASS</b> 711	<b>GROUP ART UNIT</b> 2188	<b>ATTORNEY DOCKET NO.</b> 12487/12
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\*  
 06/08/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 75	INDEPENDENT CLAIMS 7
Verified and Acknowledged	Examiner's Signature _____ Initials <i>WJ</i>				

## ADDRESS

23911

## TITLE

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